PART B-FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

(571) 273-2885 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

CERTIFICATE OF ELECTRONIC TRANSMISSION UNDER 37 C.F.R. §1.8

35690

7590

01/08/2008

I hereby certify that this correspondence is being deposited with the United States Patent Office electronic filing system on the date indicated below.

MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C. P O BOX 398

Jackie L. Pitre	(Depositor's name)
nackle Hotre	(Signature)
0 418108	(Date)

AUSTIN TX 78767-0	398		Jackie L.	Pitre		(Depositor's name)			
				Chi Hothe		(Signature)			
			$\bigcirc U$	4/8/08		(Date)			
APPLICATION NO.	FILING DATE	F	IRST NAMED INVENTOR	ATTORNEY DOC	KET NO. CONFI	RMATION NO.			
09/603,308	06/23/2000	_1	Brian Wolfe	5053-27900/	EBM	1 <i>7</i> 77			
•				n	0 D 13 C 10 D				
TITLE OF INVENTION: SYSTEM AND METHOD FOR EXTERNALIZATION OF FORMULAS FOR ASSESSING DAMAGES									
APPLN. TYPE SM.	ALL ENTITY IS	SUE FEE	PUBLICATION FEE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	No \$	51,440.00	\$0.00	\$0.00	\$1,440.00	04/08/2008			
EXAMINER ART UNIT CLASS-SUBCLASS									
Frenel, Vanel 3627 705-004000									
1. Change of corresponden Address" (37 CFR 1.363)	ce address or indication o		2. For printing on the patent front page, list 1 Meyertons, Hood, Kivlin, Kowert & Goetzel, P.C.						
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,									
	cation (or "Fee Address"	Indication	(2) the name of a single firm (
	03-02 or more recent) att	ached. Use	as a member a registered attor agent) and the names of up						
of a Customer Number	is requireu.		registered patent attorneys or a						
4.0000017773143674377	TECHNICE DAMA MO		printed.		<u> </u>				
			ON THE PATENT (print or type	•	below the degreement has been	filed for recordation as			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIGNEE: (B) RESIDENCE (CITY & STATE OR COUNTRY):									
Computer Sc	iences Corporation	ı	Austin, Texas						
Please check the appropriate assignee category indicated below (will not be printed on the patent): 🔲 individual 🛮 🖂 corporation or other private group entity 🔻 government									
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)									
Issue Fee									
☐ Publication Fee (No	n Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.								
Advance Order - #	of Copies <u>5</u>	1	☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1505/5053-27900/EBM* (enclose an extra copy of this form).						
5. Change in Entity Status a. Applicant claims S	(from status indicated abo MALL ENTITY status. Se		☐ b. Applicant is not claimi	ing SMALL ENTITY status. See,	e.g., 37 CFR 1.27(g)(2).				
The Director of the USPTO is NOTE: The Issue Fee and as shown by the records of	Publication Fee (if require	d will not be	ation Fee (if any) or to re-apply any accepted from anyone other that Office.	previously paid issue fee to the ap n the applicant; a registered atto	plication identified above. orney or agent; or the assignee	or other party in interest			
Authorized Signature				Date	april 8,20	<u> </u>			
Typed or printed name				Registration		4			
Inis collection of informatio	in is required by 37 CFR 1	.511. The infor	mation is required to obtain or re	tain a penetit by the public which	n is to file (and by the USPIO	to process) an application.			

Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.